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ABSTRACT

The goal of this project was to increase regular teacher attendance and active participation during multidisciplinary team (MDT) conferences held to ensure appropriate decisions regarding eligibility, placement, and programming of special needs students. The school psychologist, as a member of the team in the target school in Dade County, Florida, met with each regular teacher to review the teacher's role in the MDT process and to share information regarding the referring problem, psychoeducational findings, perceived eligiblity and goals. In addition, the MDT agenda was reviewed and discussed in light of teacher contribution to the process. Observational data gathered from subsequent MDT meetings showed that the participating teachers then attended MDT meetings, verbalized assessment information, and verbalized recommendations more frequently. (Author/JDD)

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PRACTICUM REPORT

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Center for the
Advancement of Education
Ed.D. Program

THE INCREASE OF REGULAR TEACHER PARTICIPATION DURING MULTIDISCIPLINARY TEAM MEETINGS USING THE SCHOOL PSYCHOLOGIST AS FACILITOR

BY

LARRY KOCH

EC 201294

3301 College Avenue
Fort Lauderdale, Florida 33314
305/475-7300

NOVA UNIVERSITY

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Larry Koch

Cluster 13

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A Practicum Report Presented to the Ed.D. Program
in Early Childhood
in Partial Fulfillment of the Requirements
for the Degree of Doctor of Education

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ABSTRACT

The Increase of Regular Teacher Participation During Multidisciplinary Team Meetings Using the School Psychologist as Facilitator. Koch, Larry, 1986: Practicum Report, Nova University Ed.D. Program in Early Childhood.
Descriptors: Multidisciplinary Team / Child Study Team / Eligibility and Placement / Special Education / School Consultation

The multidisciplinary team (MDT) is mandated by federal and state law in an effort to ensure appropriate decisions regarding eligibility, placement and programming of students who are in special need. The literature has generally supported the use of school-based MDTs, but researchers and practitioners have acknowledged that certain problems exist. The regular teacher can significantly contribute information based upon the referred student's daily performance, but does not always participate in the team process. A review of records indicated that regular teachers attended approximately one-third of the conferences held and emitted verbal comments at a minimal rate across attended sessions at the target school. Data analyzed for type of citation revealed a high percentage of descriptive student behavior, but test information and recommendations for program or curriculum were limited.

The goal of the project was to increase regular teacher attendance and active participation during MDT conferences. The school psychologist, as team member, briefed teachers subsequent to evaluation and prior to staffing within accepted guidelines. Relevant shared information included teacher assessment of the referring problem, psychoeducational findings, perceived eligibility and goals. The MDT agenda was reviewed and discussed in light of teacher contribution to the process. MDT conferences were scheduled consistent with existing practice. The school psychologist observed and recorded teacher verbalizations during MDT meetings. Data were analyzed for attendance, overall verbalization, and specific citation that included assessment information and recommendations.

Teacher attendance during conferences increased 53 percent when compared with documentation phase. Teacher presence approximated criterion and was believed to satisfy the project's intent. The mean number of relevant speaking citations emitted during MDT sessions increased and exceeded the performance objective. Marked increases in assessment information and recommendations were also noted. Additionally, enhanced participation was observed by key school staff. An increase in engaged consultation time was interpreted as an approximation toward role expansion for the school psychologist. Recommendations for improvement and dissemination were discussed.

CHAPTER I

INTRODUCTION

Description of the Community

Dade County, Florida is located in the state's southeastern region commonly referred to as the Gold Coast. It encompasses approximately 2,000 square miles of land and 350 square miles of water. The city of Miami is Dade's county seat and a major seaport. The climate is described as subtropical marine affected by its relative proximity to the gulfstream and prevailing southeasterly tradewinds. Dade's beaches, oceanfront facilities and conservation areas are natural resources that have served a growing population and tourist industry (Metropolitan Dade, 1984).

The county's 1.9 million people are dispersed among 27 municipalities and unincorporated areas that compromise Greater Miami. The area's racial and ethnic mix includes non-Latin Whites, Blacks and Hispanics. White/Black categories have noted slight change but the most significant shift has been noted in the Latin community currently estimated to be at 43 percent of the county's total population (Strategy Research Corporation, 1985). Latin growth continues to exceed the non-Latin communities because of economic and political unrest in Central and South America.

Tourism, foreign trade, international banking, light industry and manufacture combine to give Miami a diversified

economic base. Employment opportunities are varied and not dependent upon narrowly-defined areas of industry. Over half the work force is engaged in the wholesale retail trade and services (City of Miami, 1985). The next largest group of workers is engaged in manufacture and government (Terhune, 1985).

The Writer and the Work Setting

Dade County's educational system includes public and private institutions from the preschool through college. Florida statute designates public school systems by county line, each county being one district administered by an elected board of education and appointed superintendent (City of Miami, 1985). The county system is fourth largest in the nation. It is divided into four geographical areas with superintendents and staff responsible for north, north-central, south-central and south divisions (Dade County Public Schools, 1985). There are 174 elementary (K-6), 70 secondary schools (7-12) and six alternative centers with a total enrollment of over 228,000 students. The regular school program is supplemented by exceptional student education, Chapter I, bilingual studies, compensatory education and vocational instruction. Career, evaluation, guidance, psychological, research and welfare services are also provided.

The target elementary school is over 60 years old and located in a middle socio-economic residential community of less than 10,000 people. The municipality has retained its

small town atmosphere but has been described as being in transition. The school's assigned program capacity is documented at 855 but current enrollment exceeds this figure. Average class sizes range from a low of 21.3 in first grade to a high of 37.5 students in sixth grade. Student membership does not reflect the community because of authorized transfers and 50 percent of the children enrolled qualify for free or reduced lunch. Black non-hispanic children comprise 49 percent of the student body. White non-hispanic are the second largest ethnic group (32 percent) followed by Hispanic (17 percent) and Asian/American Indian children (one percent). Five percent of the student population is described as having limited English proficiency (Dade County Public Schools, 1985).

Exceptional students comprise approximately two percent of the total population. They are currently placed in either one of two learning disability classes and/or part-time speech program. Educable mentally retarded and emotionally handicapped students are transferred to the nearest school program. Gifted students spend portions of the school day at local centers.

The target school is administered by a principal and assistant. It is staffed by 56 classroom teachers, three exceptional student teachers and one guidance counselor (Dade County Public Schools, 1985). Teachers at the school have taught for an average of ten years in

Florida and approximately 61 percent hold at least a master's degree. Twelve teachers were new to the school (1984-1985) and four staff are enrolled in the beginning teacher's program. The regular program pupil/teacher ratio was cited at 21:1 (Dade County Public Schools, 1985).

The school guidance counselor holds a graduate degree and is certified. He is responsible for coordinating exceptional student identification and follow-up. The counselor organizes and conducts classroom, small-group and individual counseling. He, moreover, serves as liaison to the community and contact person for the school psychologist and area special education staff.

The exceptional student placement specialist is responsible to the Area Director. She assists in the organization of exceptional classes, provides inservice training and consults with teachers in the design or modification of individualized student curricula. The placement specialist serves as chairperson and local education agency (LEA) representative for multidisciplinary team eligibility, placement and program meetings (Dade County Public Schools, 1984).

The writer has been employed as school psychologist in Dade County since December, 1984. He holds graduate degrees in educational/school psychology. The author has worked in clinic, hospital and school settings as psychologist, consultant and administrator for the past

twelve years. He authored a federal grant and directed its funded preschool behavior habilitation program at a New York State residential facility for the mentally retarded, coordinated child study teams in the public schools and consulted with clinics and social service agencies in New Jersey. The writer is the assigned school psychologist for the target school.

The school psychologist in Dade County is ultimately responsible to the Executive Director of Student Services but reports directly to the area program director for exceptional student education. The school psychologist is responsible for the assessment and diagnosis of students who are suspected of being in need of special education. He communicates and interprets findings by written and verbal report to parents and school staff. The school psychologist also attends school study conferences and multidisciplinary team (MDT) meetings (Dade County Public Schools, 1984).

CHAPTER II

STUDY OF THE PROBLEM

Statement of the Problem

The multidisciplinary team (MDT) is mandated by federal and state law in an effort to ensure appropriate decisions regarding student eligibility, placement and programming within special education. The 1975 Education for All Handicapped Children Act (Public Law 94-142) requires a public agency to include persons who are knowledgeable about children in need, the evaluation process and placement options in planning for exceptional education (Federal Register, 1977). In addition, groups of professionals have probably replaced an individual "gate-keeper" (usually the school psychologist) because of changes in placement and planning of exceptional children that include the need for finer discriminations of learning characteristics within a given exceptionality, expansion of placement options involving a wider range of instructional staff, as well as the requirement of a formalized education program. Educational decision-making teams of teachers, parents and support personnel (e.g. psychologists, counselors, speech pathologists, nurses, social workers, etc.) have thus been charged with the responsibility, but the extent to which individual members participate is suspect.

Dade County procedure refers to the staffing/placement committee as the MDT or M-Team and requires participation of at least three professional members -- one of whom must be the district administrator for special education or a designee. MDT membership should include the placement specialist (designee) as chairperson, school psychologist, teacher to whom student is assigned, special education teacher, parents and support staff as needed (Dade County Public Schools, 1984).

Participation of the regular education teacher is acknowledged. The teacher experiences daily contact with the student and is assumed to be a valuable source of information. S/he can provide behavioral observations, assessment data, share information regarding pupil performance and progress as well as possible interventions. Ideally, MDT members share their respective findings and communicate directly in coordinated effort toward a final decision. The committee can, however, operate as a bureaucratic unit through which decisions are guided by statistical eligibility rather than group deliberation and the regular teacher is subject to limited participation in the process.

Briefly stated, the problem is that the regular education teacher can significantly contribute information based on the referred student's daily performance but does not always participate in the MDT process.

Documentation of the Problem

Participation was operationally defined for this project in terms of teacher attendance and verbal contribution during the eligibility and placement conference. A search of MDT records and review of the school psychologist's daily planner revealed 43 conferences at the target school between December, 1984 and August, 1985. The documentation phase for the practicum included 17 eligibility meetings that were held from September through November, 1985. Conferences varied in length from 20 to 45 minutes (mean = 31 minutes). Team size ranged from two to nine members (mean = 3.4). The school psychologist and area placement specialist were always in attendance. Parents were present at 11 meetings (65 percent). Regular education teachers attended 35 percent of the conferences held -- six meetings.

It was further determined that regular teacher attendance during the six meetings did not guarantee contribution. Teacher contribution was difficult to operationalize but frequencies of spontaneous and elicited verbalization were used as a gross measure. A verbal comment after latency of five or more seconds without teacher or team member speaking was counted as a separate response. Observations were conducted by the participating school psychologist via an event recording procedure developed by Tukey (1977). Teacher verbalized citations ranged from 0 to 5 across sessions (mean 2.5).

Data were additionally recorded and analyzed for type of contribution. The regular teacher's description of student behavior was recorded as a classroom item; test information was coded as an assessment item; verbalizations regarding program, placement or curriculum were cited as recommendations; and comments that did not fit any category or irrelevant to the MDT were recorded as other. During the documentation phase, it was found that 79 percent of observed teacher citations related to classroom behavior. Teacher verbalizations were then evenly distributed at 7 percent for the assessment, recommendations and other categories.

One reliability check was made during the documentation phase of the project. Reliability was measured by comparing observation records across category. Agreements were divided by the total number of observations for the session and multiplied by 100 $\left(\frac{\text{agreements}}{\text{total observations}} \times 100\right)$. Percentages of agreement ranged from 82 percent for the assessment category to 94 percent for classroom information.

Analysis of the Problem

In order to achieve an interdisciplinary solution all members should participate in tasks that include gathering information about the student, evaluating performance, targeting problems and contributing to final program decisions. It was assumed that all committee members

participated in MDT meetings, but this documentation has indicated at best limited contribution by regular education teachers. Obvious reasons include large classes, bureaucratic realities and frustrating system demands on the overwhelmed teacher. The regular teacher, however, admits to a lack of training in the area of exceptional student education. They are further insulated by special education staff who are knowledgeable and have historically assumed almost exclusive responsibility for the special needs process.

Indeed, it has been suggested during informal conversation that not too long ago the process was limited to simple teacher referral, parent consent, testing and placement. Best practice indicated but federal law eventually required a multidisciplinary approach to student identification, evaluation, diagnosis and programming. Districts and classroom teachers were faced with the need to "retool." Occasional inservice during the early years may have contributed to superficial understanding, but the process as a gestalt remained elusive.

Team participants, however, appeared to be dependent upon dominant members such as the placement specialist and school psychologist to "guide" decision making. The regular teacher and others (including parents) viewed themselves as less important when, in fact, they have more direct/extended contact with the student and potential

to contribute important information. The school psycho-educational report was not intended as an exclusionary document. Rather, it is information shared by one member to be considered with additional data by the team for use in establishing eligibility and program placement.

In sum, system demands, lack of knowledge, historical precedence and the team dynamic itself contributed to the problem.

Review of the Literature

Multidisciplinary teams were advocated in the schools prior to P. L. 94-142 (Buktenica, 1970; Falik, Grimm, Preston, and Konno, 1971; and Hogensor, 1973) and specifically mandated by federal law and state corrollaries after 1975. Legislative history, however, does not cite empirical evidence which supports the use of teams. Ballard-Campbell and Semmel (1981) suggested that litigation, parents and state practice were more powerful than research in developing educational policy and legislation.

Fenton, Yoshida, Maxwell, and Kaufman (1979) delineated a number of goals to be accomplished by the team for every student with special needs and they include: the determination of student eligibility for special education; review of the required documented information before making decisions, evaluating educational significance of these data;

determining placement; formulation of goals and objectives; communication with parents about changes in program; planning information needed for future review of program and progress; establishing specific date for review; and reviewing student progress as well as continued appropriateness of program.

The team approach to assessment and decision-making has been used by mental health professionals for many years (Black, 1977). It is fairly well established in the behavioral sciences that group decisions, under certain conditions, are superior to individual decisions (Schein, 1980; Shaw, 1981; and Hill, 1982). Relatively few investigators have specifically addressed placement decisions for exceptional children in the literature.

Vautour (1976) studied twenty teams composed of 127 certified individuals who underwent simulated decision activities in isolation and then repeated the process as an entire team. Basic demographics were presented for each child as well as severity of need. Respondents were asked to select the most appropriate educational placement ranging from regular class to special residential treatment. Placement selections were compared with those made by university experts. Results indicated that team decisions were in closer agreement with the experts.

Pfeiffer (1982) sought to replicate the Vautour study and determine whether team advantages existed across

cultures. He presented ten brief behavioral descriptions of children referred for special education services to 102 Hispanic educational evaluators attending a summer workshop in Puerto Rico. The subjects responded independently and then as randomly assigned members of 34 simulated MDTs composed of three members each. The author found that teams made more consistent decisions than individuals.

In order to present a more complex description of students referred for special education services within a realistic framework, Pfeiffer and Naglieri (1983) structured a set of experimental conditions using actual comprehensive psychological reports and existing school based teams consisting of professionals who were working together for at least one year. Twenty-two MDTs participated from urban and rural school districts. Each team consisted of at least one school psychologist, one special education teacher and one regular education administrator. A total of 86 certified professionals were given detailed psychological reports for two students described as educable mentally retarded (EMR) and emotionally disturbed (ED). Subjects decided individually and then produced group decisions in their respective teams about placement when presented with a continuum of services. In addition, a group of 20 university trainers selected placement options for the two case descriptions. The results showed

little difference between placement options across treatments when compared with criteria set by experts, but the team condition exhibited significantly less variability in decisions. The investigators argued that the more narrow range of placements supported team efficacy.

Although the literature provides some evidence regarding the effectiveness of teams, several interpretive and methodological issues have been raised. Yoshida (1983) submitted that there are no widely accepted criteria for the appropriateness of placement decisions. Consistent results and agreement with the experts may not be considered appropriate by other researchers. Indeed, additional study of individual versus team superiority is needed especially for difficult cases found in actual school situations.

While researchers and practitioners have reported perceived benefits, no single factor can account for apparent difficulties. It is hypothesized that a number of intra- and inter-individual characteristics combined with personal and procedural dynamics of the team have produced certain problems. It has been argued that teams generate ambiguous decisions (Hefferin and Katz, 1971), raise concerns over territoriality (Wallace, 1976) and increase role confusion (Wing and Sarsley, 1971). Pfeiffer (1980) analyzed empirical findings and categorized various recurring problems experienced by MDTs. The four categories included an unsystematic approach to collecting

and analyzing diagnostic information; minimal involvement of parents and regular educators; poorly developed decision-making processes; and inadequate collaboration.

An observational analysis was conducted by Goldstein, Strickland, Turnbull and Curry (1980) during 14 in vivo conferences in three North Carolina school districts. They found that fewer than one-third of the meetings were legally constituted with less than full representation as per federal regulation. Classroom teachers attended only 43 percent of the team meetings and participated less than 10 percent of the time. Ysseldyke, Algozzine, and Mitchell (1982) videotaped 34 actual meetings in 16 Minnesota districts and found that the purpose of the meeting was seldom stated explicitly; team member roles were not clearly defined; data presented were generally not relevant to the final decision reached; and there was no clear delineation of activity or final decision. It was also noted that team members did not participate equally in all aspects of decision-making.

Ysseldyke, Algozzine and Allen (1982) further explored the degree of participation by regular education teachers in MDT decisions. An interval method (ten seconds) was used to collect data during 24 videotaped conferences. It was found that teachers spoke during an average of 27 percent of the intervals but contribution was tabulated at less than ten percent in seven of the meetings. Regular

teachers did not discuss test data and recommendation in 67 percent of the conferences. The researchers concluded that teachers either do not participate in team meetings or contribute in a superficial manner and encouraged team leaders to elicit teacher participation.

In an earlier study, Yoshida, Fenton, Maxwell, and Martin (1978) found that team participation in school eligibility meetings was positively related to satisfaction and role but noted little relationship between role and satisfaction. School psychologists, social workers, counselors, and administrators reported that they participated in decision-making more often than did regular or special education teachers. Regular teachers perceived themselves as being low in participation and satisfaction yet were described as "pivotal" within the team process. Further study was recommended in order to increase participation for this heretofore disenfranchised group.

Gilliam and Coleman (1981) surveyed 130 participants of 27 MDTs for rank expectancy across role and contribution during the eligibility and placement process. Members were questioned before a meeting in order to determine the status ranking of 15 roles most often represented according to importance. Team participants then evaluated themselves and others subsequent to the meeting on influence and contribution across diagnostic planning, placement,

implementation and due process functions. Highly ranked preconference roles included special education teachers, psychologists, parents and regular teachers. Post-rankings, except for special education teachers and psychologists, were different. Indeed, parents, regular teachers and principals ranked higher in importance than in actual contribution and influence. The expected high status attribution was not validated by team members themselves.

Bailey (1984) argued that the literature has focused on isolated team problems. He proposed a triaxial model for the conceptualization of team process and function in an effort to understand dysfunction and assist in remediation. Axis I dysfunction is directly related to the developmental nature of teams and groups. One must analyze and consider the stage in which the group is operating -- either in terms of organization, process or within the meeting itself. Roles are studied within levels that include unidisciplinary (no team function), multidisciplinary (professionals meet but remain independent), interdisciplinary (interactive effort by members) and transdisciplinary (members share respective knowledge, roles and responsibilities) frameworks. Axis II analysis illustrates subsystem operation regardless of developmental stage. For example, dysfunction can occur when a member is viewed as inferior. The author believed that parents, regular teachers and paraprofessionals are particularly

vulnerable and may withdraw from the process. Axis III dysfunction is the result of team problems as a whole and may include the issues of organization, role clarity, and efficiency of task performance.

Efforts to increase participation and improve decision-making in the literature have primarily taken the form of author recommendations that were not subjected to empirical study. Pfeiffer's (1980) remedial strategies included shared responsibility, ongoing consultative support, incentives and high status, process meetings, program evaluation, greater organizational structure, expanded diagnostic-intervention systems, role clarification, and public relations. Ysseldyke (1983) believed that training in team decision-making should emphasize organizational procedure, clearly stated agenda, and the employment of data relevant to the decision. He also advocated the establishment of a mutual support system between regular and special education.

Yoshida (1983) considered an organizational perspective where the school psychologist who is trained in organizational development can assist teams in conflict management, program evaluation and decision-making. The organizational school psychologist, according to the author, could be helpful in changing structures because s/he already functions as boundary crosser and change agent.

Bardon and Bennett (1976) and others (Alessi, 1983; Witt and Elliot, 1983; Koch and Breyer, 1974) believed

consultation to be the single most important function of the school psychologist. Consultation can be used to define a process of interaction between school psychologist and teacher. The interaction consists of the consultant helping in regard to a current problem for which s/he has specialized competence. The goal of successful consultation is to share information in a non-threatening way for eventual generalization to similar concerns. The relationship is characterized "by two professionals with different but parallel competencies" (p. 319). Yoshida and Abramson (1982) found that less than 35 percent of regular education teachers received preservice or inservice regarding the MDT process. It is the school psychologist, according to the authors, who becomes the most logical team member to serve as consultant to the regular teacher.

Kabler and Genshaft (1982) argued that MDT activities do not reflect planned, systematic and functional decision-making. Kabler and Carlton (1983) developed an agenda based upon theory and research to facilitate effective decisions. A democratic team effort is encouraged where information sharing takes place in an accepting atmosphere with equal opportunity to influence final outcome. The structure addresses <u>problem perception</u> (assumptions, past interventions and their effectiveness); <u>alternative exploration</u> (suggested needs and alternatives); and <u>solution selection</u> (prioritization, responsibility, timelines).

Anderlini (1983) drew heavily from the literature in organizational development and small group dynamics in her detailed inservice reportedly operational in several western states. The program offered training in team theory, communication skills and problem-solving techniques presented through lecture, stimulation, readings, and discussion. Concepts, strategies and outcomes were clearly delineated across component areas. The comprehensive undertaking required active administrative support at district levels but its cost-effectiveness has not yet been determined.

Fleming and Fleming (1983) assumed a pragmatic approach as they described the advantages of introspective self-study. Despite their dissatisfaction, team members rarely propose positive change in MDT function. The authors urged members to take advantage of data that are easily accessed for purposes of evaluation and modification. While sophisticated analysis may be unrealistic in the educational setting, most teams were believed capable of addressing specific questions regarding participation and decision-making.

A number of writers have advocated the use of school-based MDTs in order to provide effective special education services. The potential is great for teams to generate appropriate decisions, but it is evident that certain problems exist. The regular teacher is an important member of the team and her/his lack of participation is

disturbing. The school psychologist who functions as team member and school consultant is considered to be a logical choice as facilitator in the increase of teacher participation consistent with organizational procedure and guidelines.

CHAPTER III

ANTICIPATED OUTCOMES AND INSTRUMENTATION

Statement of General Goals

The goal of this project was to increase the regular education teacher's participation in the multidisciplinary team process. The teacher, subsequent to a pre-eligibility briefing, was to attend meetings; contribute information based on the referred student's daily performance; and actively participate in decisions regarding eligibility, placement and programming.

Terminal Performance Objectives

The following objectives were projected for criterion level at the target school by the end of September, 1986:

1. The regular education teacher, subsequent to pre-eligibility briefing, will attend MDT meetings for referred students in her/his class 90 percent of the time as measured by direct observation.
2. The mean number of relevant speaking citations emitted by the regular teacher during MDT meetings will increase to 80 percent over documentation phase as measured by direct event recording of verbalized comments.
   a. The regular education teacher will verbalize assessment information for the referred student in 20 percent of the total citations during MDT meetings as measured by direct event recording.
   b. The regular education teacher, subsequent to pre-eligibility briefing, will verbalize recommendations for the referred student in 30 percent of the total citations during the MDT meetings as measured by direct event recording.

Instrumentation

An informal review of applied journals in the behavior sciences revealed a high percentage of articles in which direct observation was emphasized as part of implementation as well as the method of choice for evaluting treatment effects across populations and environments. Event recording is a tallying or frequency count of discrete behavior. It is a natural product of behaviors that are operationally defined and distinguishable as isolated units of behavior. The major advantage is its simplicity, but the method does not permit simultaneous recording of more than one behavior or individual (Hall, 1971).

Event recording is a frequently used observational procedure because it most directly reflects the frequency of a behavior's occurrence (Hall, 1971). Notations were made via the Tukey recording method (1977) each time the teacher engaged in conversation. The target behavior was operationally defined and reliability addressed in chapter two of this report. The frequency procedure and recording method were chosen because of its relative simplicity as the observer was directly involved in MDT conferences.

An observation sheet was designed for the recording of spoken citations during MDT meetings (see Appendix A). The sheet was also used to document teacher attendance. Outlines for the student briefing (see Appendix B) and MDT agenda (see Appendix C) were prepared as guides to the consult

session between school psychologist and referring teacher. The agenda outline follows district practice but expressly provided for teacher input.

CHAPTER IV

SOLUTION STRATEGY

Anderlini (1983) proposed a comprehensive inservice of team members in the areas of group dynamics, communication and problem solving. This solution was plausible and could affect pervasive change in MDT function, but time constraints and administrative realities preclude its adaptation to the target setting. A pragmatic approach was considered by Fleming and Fleming (1983) in the use of readily available data for self-study and change within specific areas of need.

The school psychologist, as member of the MDT in the target school, proposed a pre-eligibility briefing using a nonthreatening consultative format. The consultant and teacher shared information regarding the referred student as well as reviewed teacher's role within the MDT process. The briefing was intended to give more immediate response to teacher concern, offer "shared ownership" of the problem and provide a vehicle for ongoing individualized staff development. It was not intended to predetermine eligibility or short-circuit the MDT. The briefing was designed to enhance the process by additional contribution of valuable data through increased participation by the regular teacher.

Documentation was gathered and the problem reviewed with the guidance counselor who is liaison to area special

education staff at the target school. The proposed solution and project goals were discussed. Some thought was given to the inclusion of a short group introduction to the briefing but times conflicted with the school psychologist's assigned schedule. It was decided, instead, that a rationale could be given during the first briefing attended by the referring teacher. The outlined program was considered within the psychologist's role as school consultant. The building principal was, however, contacted prior to implementation.

Referral procedure for students who were suspected of being in need of special education was conducted as required by the county (Dade County Public Schools, 1984). Student briefings were convened after program approval and throughout the implementation phase. The school psychologist met with referring teacher at the target school on his assigned day during a mutually convenient time after evaluation and prior to the MDT eligibility/placement conference. Relevent information that was shared included teacher assessment of the problem, review of psychoeducational findings; eligibility as perceived by the teacher and school psychologist, and teacher generated goals (see Appendix B). The MDT agenda was reviewed and discussed in light of teacher contribution to the process (see Appendix C).

MDT conferences were scheduled by the assigned area placement specialist consistent with existing practice. Notification of date and time was forwarded to the school

and teacher coverage provided. The school psychologist observed and recorded regular teacher attendance and verbalization during the MDT meeting (see Appendix A). Data were analyzed for attendance, overal verbalization, and specific citations to include assessment and recommendation.

Calendar Plan

Preliminary phase (July and August, 1985). The practicum problem questionnaire (PPQ) was written and discussed with the practicum reviewer. Introductory materials were researched and preliminary discussions held with relevant staff at the target school regarding subjective need and project feasibility. The observation protocol (see Appendix A) was designed and tested for function and facility by the writer.

Documentation phase (September through November, 1985). Reliable and valid documentation was considered to be a vital component of the project. Significant planning, time and effort was given in an attempt to objectively verify the stated problem. The procedure was inherent to the implementation as well as program evaluation. The participating school psychologist observed and recorded regular teacher attendance and contribution during MDT meetings at the target school. Computations were performed immediately following each conference. Project feasibility was documented based upon objective need and served as

comparative reference for ongoing evaluation. The briefing outline and MDT agenda were developed by incorporating relevant aspects of the literature with task analysis of existing county procedure.

Proposal Review (December, 1985). The proposal was written and submitted for review. The manuscript was critiqued and changes were made. The revised proposal was presented for approval and permission was given to implement.

Documented implementation phase (January through September, 1986). Briefings were convened as described in the solution strategy. The school psychologist consulted with regular teacher subsequent to the student's evaluation and prior to the MDT conference. Student information gathered by both parties was shared, roles clarified and eligibility discussed. MDTs were scheduled as mandated. Documentation and evaluation continued throughout the implementation phase.

Project analysis (September, 1986). Recorded information was analyzed for attendance, spoken citation, and verbalized reference to assessment and recommendation. Percentages were compared with data produced during the documentation phase and criteria level set for projected outcomes.

Final phase (October through December, 1986). Results unanticipated outcomes, recommendations and dissemination were documented. The manuscript was critiqued and presented for approval.

CHAPTER V

RESULTS, CONCLUSIONS, AND RECOMMENDATIONS

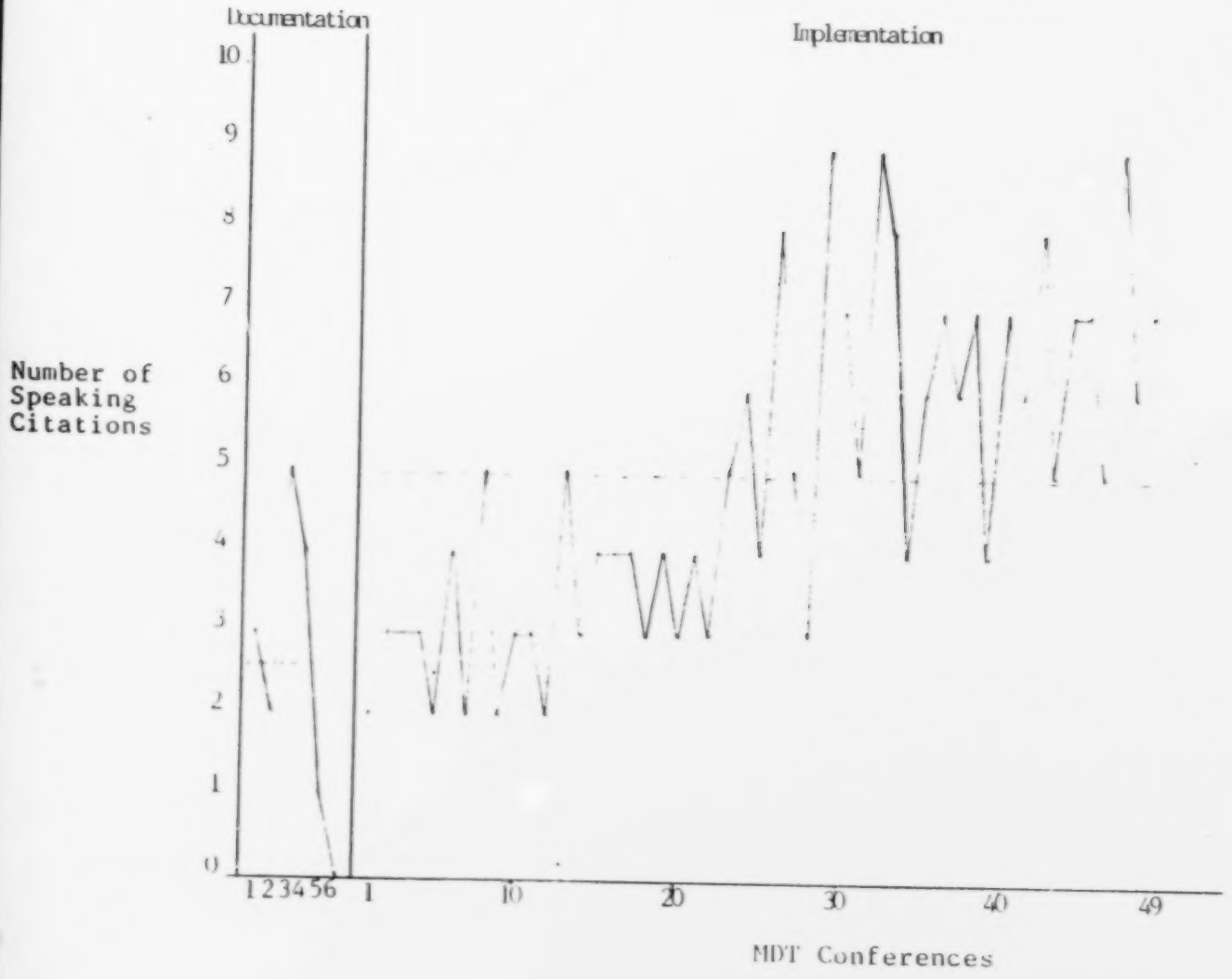
Results

The goal of this project was to increase regular teachers' participation during multidisciplinary team meetings. Four objectives were established in order to address attendance, relevant speaking citations, verbalized assessment information and cited recommendations by teachers during the conferences.

A review of observational data indicated that 56 meetings were convened at the target school during the implementation phase. Conferences varied in length from 25 to 55 minutes (mean = 42 minutes) and team size ranged from three to seven members (mean = 5.0). The following performance outcomes were derived from observational data gathered during the meetings that were convened from January through September, 1986.

1. The regular education teacher, subsequent to pre-eligibility briefing, attended MDT meetings for referred students in her/his class 88 percent of the time (49 conferences).
2. The mean number of relevant speaking citations emitted by the regular teacher during MDT conferences increased to 96 percent over documentation phase (see figure 1).
    a. The regular education teacher verbalized assessment information in 20 percent of the total citations during MDT meetings.
    b. The regular education teacher, subsequent to pre-eligibility briefing, verbalized recommendations for the referred student in 33 percent of the total citations during MDT conferences.

Figure 1. Frequency of Speaking Citation By Attending Teacher Across MDT Conferences



Discussion of Results

Teacher attendance and active participation increased during the implementation phase of this project. Teacher attendance during meetings (88 percent) approximated the terminal objective (90 percent). The difference between criterion and final performance (one meeting) was not believed to be significant. A review of the project diary suggested that absences occurred during times of legitimate shortage in staff coverage and near the end of grading periods. Nevertheless, a 53 percent increase in attendance was believed to satisfy project intent.

The mean number of relevant speaking citations emitted during MDT sessions increased over documentation and exceeded criterion (see Figure 1). Teacher verbalized comments ranged from two to nine across meetings (mean = 4.9). Regular teachers who experienced the implemented procedure for subsequent referrals emitted higher response rates than did those teachers who referred once during the project. The former verbalized at a rate of 63 percent over the latter. Mean responding increased during the course of the project, which further supports learning as a factor.

Data were additionally recorded and analyzed for citation by coded type as defined in chaper two (see table 1). Verbalized assessment information and recommendations increased during the implementation phase. These data either matched (assessment) or exceeded (recommendations)

TABLE 1. Spoken Citations By Attending Regular Teachers During MDTs

Topic	Percent Total Citation Devoted To Topic By Phase		
	Documentation	Implementation	Change
Classroom	79	37	-42
Assessment	07	20	+13
Recommendations	07	33	+26
Other	07	10	+03
Mean Verbalization	2.5	4.9	

respective criterion levels. It is interesting to note that teacher descriptions of student behavior declined in favor of the more objective categories. Classroom descriptions, however, continued to be subjective and were not the result systematic observation or other measurement activity. Standardized group and teacher-made tests as well as graded work samples were offered as assessment information. Recommendations were primarily limited to the appropriateness of special needs placement (92 percent of the citations within this category) and rarely addressed specific interventions. The three percent rise in irrelevant data (other) was believed to simply reflect increased teacher verbalization.

Two reliability checks were made during the course of the project's implementation. Reliability was measured using the procedure described in chapter two ($\frac{\text{agreements}}{\text{total observation}} \times 100$). Percentages of agreement ranged from .81 (other) to .89 (assessment). The mean percent of agreement was calculated at .84.

Unanticipated Outcomes

Increase in team size and length of meeting during the implementation phase may be viewed as logical outcomes. Enhanced participation was noted by the assistant administrator in the form of systematizing teacher coverage and occasional attendance. Although data were not taken,

the guidance counselor also found time in his busy schedule to actively contribute. This finding becomes more important as district considers decentralized school-based responsibility for the special education process.

The pre-eligibility briefing with teacher decreased in length of time over the course. Briefings lasted an average of 18 minutes during the first three months of the project, but decreased to approximately 12 minutes as participants became familiar with the process.

A marked increase in engaged consultation time (47 percent) was found when the writer's daily log was analyzed for teacher contacts subsequent to evaluation. In addition to information shared according to the briefing outline (see Appendix B), the school psychologist and teacher, in some cases, began to discuss alternate intervention strategies. This was noted as a positive expansion of the school psychologist's role within a consultative context.

Conclusions

The multidisciplinary team is mandated by law in an effort to ensure appropriate decisions regarding the special education process. Researchers and practitioners have reported perceived benefits, but have also acknowledged a number of difficulties. In order to be effective, it is believed that teams must complete a situational inventory

specific to individual needs within a dynamic ecological context. This project focused on the need to increase teacher participation during MDTs in the target setting. Regular teachers attended approximately one-third of the meetings and contributed minimally during the documentation phase. These data were troubling in light of teachers' daily contact with the referred student and the potential to offer important information to other team members. The school psychologist, as team member, was able to increase participation consistent with organizational procedure as reflected in the stated outcomes. Attendance and relevant speaking citations increased during MDT conferences. Enhanced participation was also noted for key school staff - an important consideration as district appears to be moving toward school-based responsibility for special education. Finally, increased consultation time was viewed as a positive expansion of the school psychologist's role.

Ultimately, the major determinant of effective MDTs rests in pragmatic situational analysis and intervention by team members consistent with existing organizational guidelines. The consulting school psychologist is considered to be the logical team member to facilitate such change.

Recommendations

The following recommendations are made in an effort to improve and extend project findings:

1. Ongoing staff development in the form of systematic observation, goal setting, and decision-making may help to enhance the quality of decisions made by participating members.
2. Professional team members may work jointly to help foster parental contribution during MDT conferences.
3. Comprehensive analysis within and between MDTs may contribute toward the district goal of school-based responsibility for the special education process.

Dissemination

1. Plans will be made to present findings at the 1987 meeting of the Florida Association of School Psychologists (FASP).
2. A revised manuscript will be submitted for review and publication to a professional journal in the area of school psychology.
3. A copy of the report will be given to the Executive Director of Special Education.
4. Copies of the abstract will be forwarded to selected school psychologists.

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APPENDIX A

SPEAKING CITATIONS BY REGULAR EDUCATION TEACHER DURING THE MDT ELIGIBILITY CONFERENCE

APPENDIX A

Speaking Citations by Regular Education Teacher During the MDT Eligibility/Placement Conference

MDT #	DATE/ TIME	CLASSROOM	ASSESSMENT	RECOMMENDATION	OTHER	TOTAL BY CASE
1.	Date: Time Stop: Start:					
2.	Date: Time Stop: Start:					
3.	Date: Time Stop: Start:					
4.	Date: Time Stop: Start:					
5.	Date: Time Stop: Start:					
Total by category						

APPENDIX B

STUDENT BRIEFING OUTLINE

APPENDIX B

Student Briefing Outline

I. Teacher Assessment of the Problem

- A. Academics
  - 1. Skills Placement by subject area
    - a. reading/math series level
    - b. group achievement tests
    - c. classroom tests
  - 2. Relative strengths and weaknesses
  - 3. Classroom interventions and results
- B. Expressive and receptive language skills
- C. Ability and motivation
- D. Work habits
- E. Behavioral/social adjustment
  - 1. Target behaviors
  - 2. Classroom interventions and results
- F. Attendance
- G. Teacher awareness of educationally relevant medical findings

II. Psychoeducational Evaluation

- A. Relevant background
- B. Ability
- C. Achievement
- D. Process
- E. Social/Emotional

Appendix B Continued

III. Eligibility

A. Review of district special education requirements

B. Perceived eligibility

IV. Student Goals

APPENDIX C

MDT AGENDA OUTLINE

APPENDIX C

MDT AGENDA - OUTLINE

I. Membership and Roles

II. Agenda

- A. Purpose of Meeting
- B. Reason for Referral
- C. Previous Interventions and Results
- D. Assessment of the Referring Problem
  1. parents
  2. regular education teacher
  3. additional persons as indicated
  4. school psychologist
- E. Eligibility
- F. Parent Questions
- G. Alternative Educational Options
- H. Placement
- I. Annual Goals and Objectives
- J. Due Process
- K. Signatures
- L. Adjournment